

Work Order ID 121184

June-16-14 2:25:35 PM

\*121184\*

Page 1

Item ID: 646.3312

Revision ID:

Item Name: Center Plate

Start Date: 6/16/14

Start Qty: 5.00

\*5\*

Required Date: 6/16/14

Req'd Qty: 5.00

\*5\*

Reference:

Accept

\*N900040100\*

Setup Start

\*NS1\*

Stop

\*NS2\*

Cust Item ID:

Customer:

Approvals:

Process Plan: MLS

Date: 14-06-18

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

\*NR1\*

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
646.3300	N/C								

100

0.00

\*100\*

Bandsaw

Jeaspa Bandsaw

BAND SAW

Memo

Cut Blank at 16.300"

\*\*\* ONE BLANK MAKES TWO PARTS\*\*\*

0.00

B.A 14/07/08

6 0

DAS  
08  
9-89

110

0.00

\*110\*

HAAS 1

HAAS CNC vertical machine #1

HAAS CNC VERTICAL MACHINING #1

Memo

1-Machine per folio FB153

DWG REV: N/C

FOLIO REV: AA

2- deburr and break all sharp edges

0.00

B.A 14/07/08

6 0

DAS  
08  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 121184

\*121184\*

Page 2

June-16-14 2:25:35 PM

Item ID: 646.3312

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Center Plate

Start Date: 6/16/14 Start Qty: 5.00

\*5\*

Cust Item ID:

Required Date: 6/16/14 Req'd Qty: 5.00

\*5\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

QC2- Inspect parts off machine FAI/FAIB

0.00

\*120\*

B.A 14/07/08

6

φ

DAS  
08  
9-09

QC

Memo

0.00

Quality Control

130

QC8- Inspect parts - second check

0.00

\*130\*

6

SL 14-7-10

QC

Memo

0.00

Quality Control

131

0.00

\*131\*

HandFinish

Memo

0.00

Hand Finishing

CLEAN AND REMOVE ALL PART MARKING

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Page 3

## Quality Control

CL 14/07/11 (6)

01/17/23 (6)

Sing  
4/7/24

6

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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FAULT CATEGORY			
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Page 4

Run	Start	*NR1*
	Stop	*NR2*

[illegible]

MLS 14-07-20

HC-7-24

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Design											
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Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY							
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# Picklist Print

June-16-14 2:25:35 PM

Page 1

Work Order ID: 121184

**\*121184\***

Parent Item: 646.3312

**\*646.3312\***

Parent Item Name: Center Plate

Start Date: 6/16/14

Required Date: 6/16/14

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A NEW ISSUE 12/11/16 JFS VERIFY BY: JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B5.000X0.375		Purchased	No			100	f	44.2700	0.68	4			
<b>*M7075T6B5 000X0 375*</b>									<b>**</b>	<u>L.A 14/07/08</u>			
7075-T6 BAR 5.000" X 0.375"													

Location

Loc Qty

Loc Code

MAT049

44.27

m126615

8

→ m127614

1.5

→ m128502

34.77

1.5000 ft  
2.9062 ft

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order update only ☐

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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
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### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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APICAL  
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 03724

SHEET 1 OF 1

DWG NO. 646.3300

REV: N/C

PREPARED  
BY B. PETERS

DATE: 12/05/12

EFFECT ON DWG  
☐ INC. ☒ UNINC.

DWG TITLE: UPPER CUTTER ASSY

APPROVED BY: ENGR *[Signature]*

MFG *[Signature]*

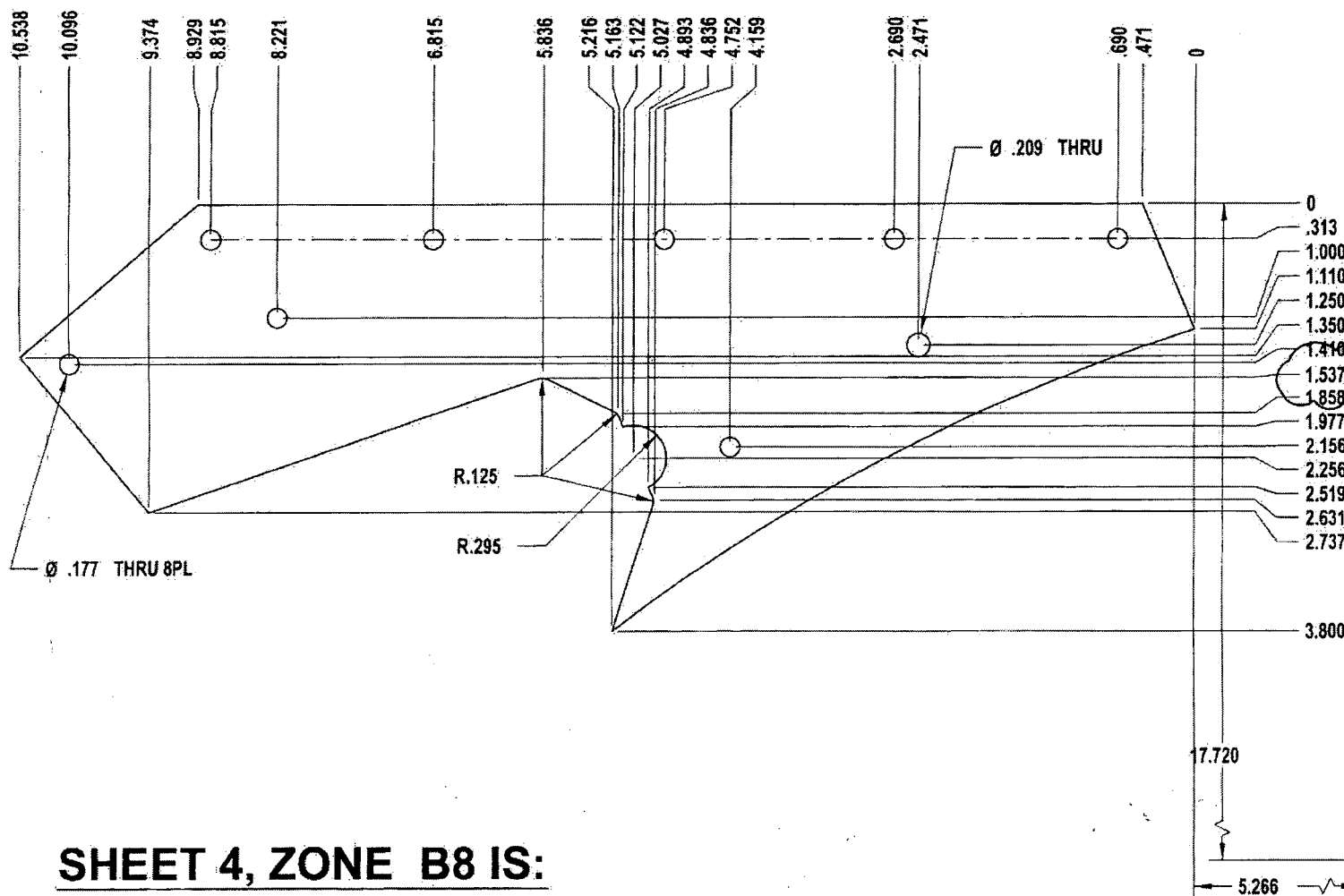
QC

EFF: NEXT ORDER

TRANSACTION CODES (TC)  
A-ADD C-CREATE  
R-REVISE D-DELETE

REASON:  
REVISED ORDINATE DIMENSION.

ECR:  
D-12-025



SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE.  
WORK ORDER  
NO. 121184 MJS  
14-06-18

**SHEET 4, ZONE B8 IS:**

DOCUMENTS EFFECTED:

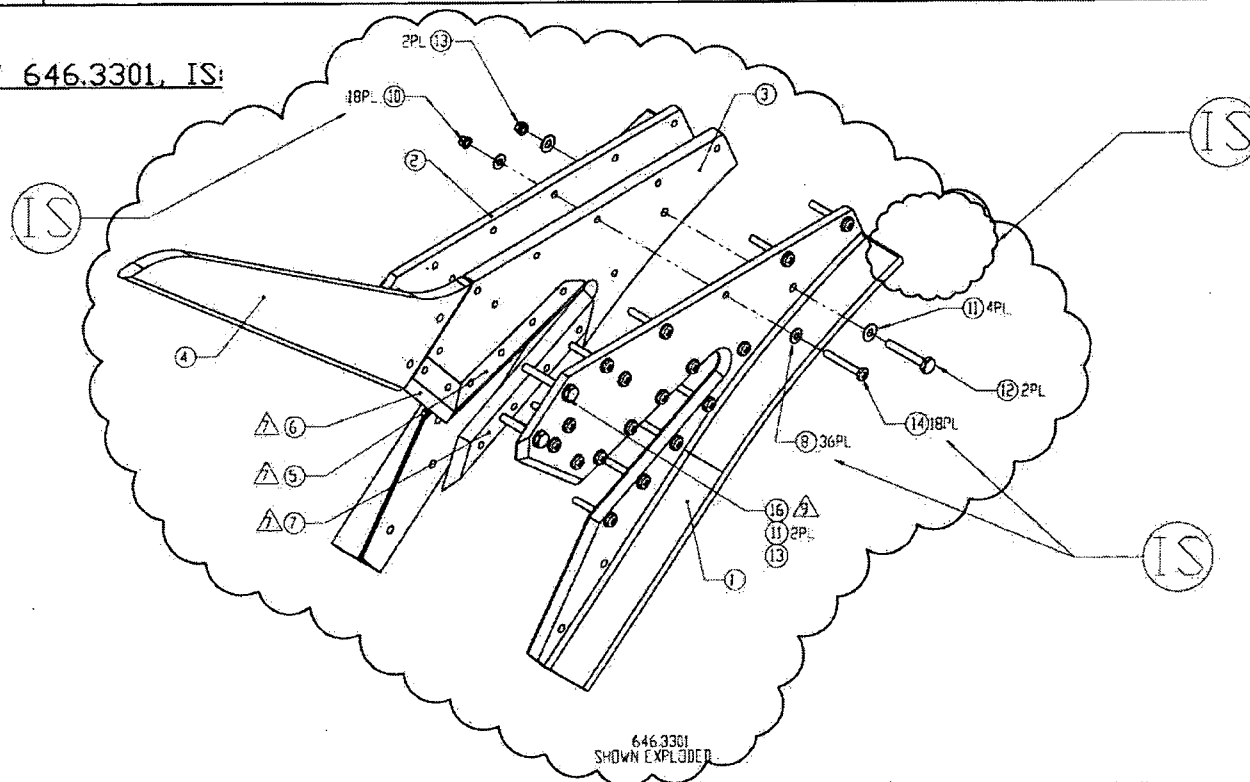
☐ RFMS ☐ MDL ☐ INSTALL INSTRU ☐ ICA ☐ BOM

CHANGE CATEGORY  
☐ MAJOR ☒ MINOR

DER REVIEW REQUIRED  
☐ YES ☒ NO

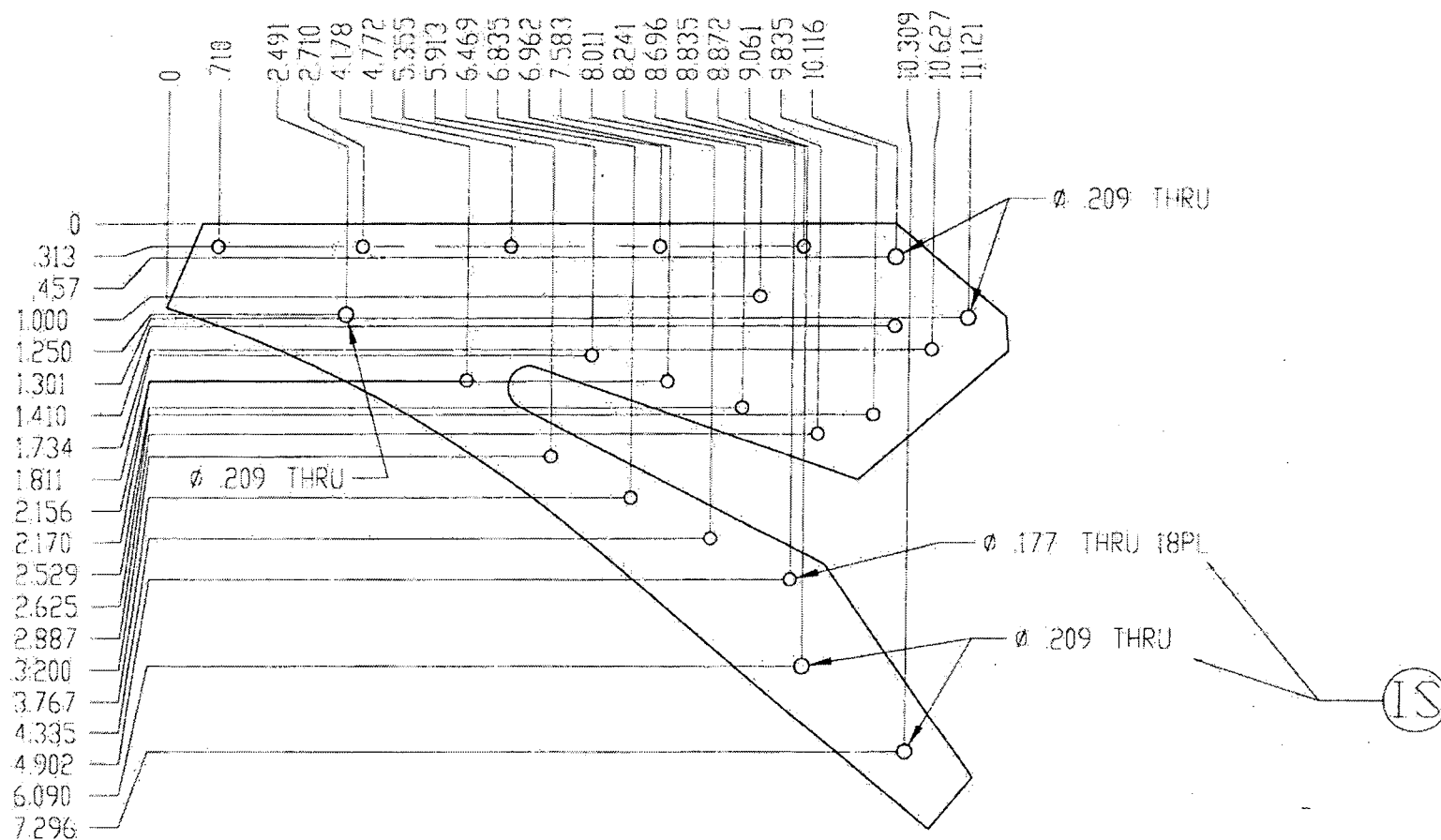
APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 02196		SHEET 1 OF 2	
	DWG NO. 646.3300	REV: N/C	PREPARED BY S. HUFF	DATE: 01/05/09
	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.			
	DWG TITLE: UPPER CUTTER ASSY			
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER	
TRANSACTION CODES (TC) A-ADD C-CREATE R-REVISE D-DELETE		REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS		

SHEET 1, VIEW 646.3301, IS:



14	R	601.2765	18	SCREW	MS27039-0819
10	R	601.1541	18	LOCKNUT	MS21042L08
9	D	601.2766	3	RIVET	MS20470AD5-18
8	R	601.2764	36	WASHER	NAS1149FN832P
			3301		
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED: <input type="checkbox"/> MDL <input checked="" type="checkbox"/> INSTALL INSTRU <input checked="" type="checkbox"/> ICA <input type="checkbox"/> FMS <input checked="" type="checkbox"/> BOM					CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR
					DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

SHEET 3, SECTION VIEW A-A, IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



① MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12

② FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III,  
CLASS 2, COLOR BLACK;  
CARDINAL 4860-50 PRETREATMENT PRIMER  
PRIME IAW MIL-P-23377J TYPE I CLASS N

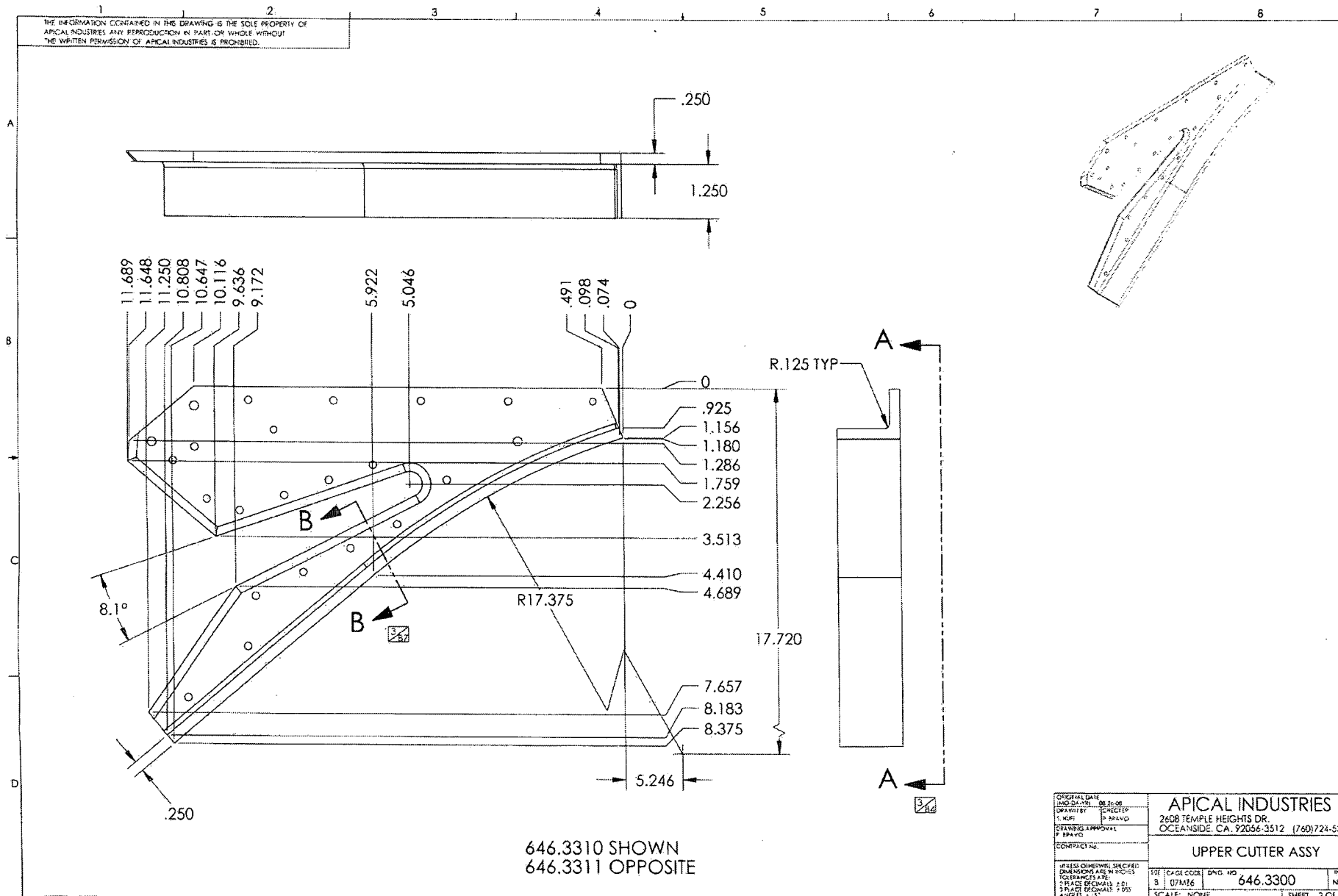
③ MATERIAL: AISI A2 TOOL STEEL  
CONDITION: ANNEALED  
POST PROCESS: HEAT TREAT TO 58-62 Rc ROCKWELL HARDNESS

4. FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
5. DEBURR AND BREAK ALL SHARP EDGES EXCEPT WHERE OTHERWISE NOTED
6. IDENTIFY IAW MPP-120
7. APPLY F/N 15 AS REQUIRED TO ALL FAYING SURFACES OF F/N 5, 6 & 7 UPON ASSEMBLY
8. CUTTING EDGE INTENDED TO BE SHARP, DO NOT BREAK SHARP EDGE
9. INSTALL FASTENER FINGER-TIGHT

646.3301  
SHOWN EXPLODED

[illegible]

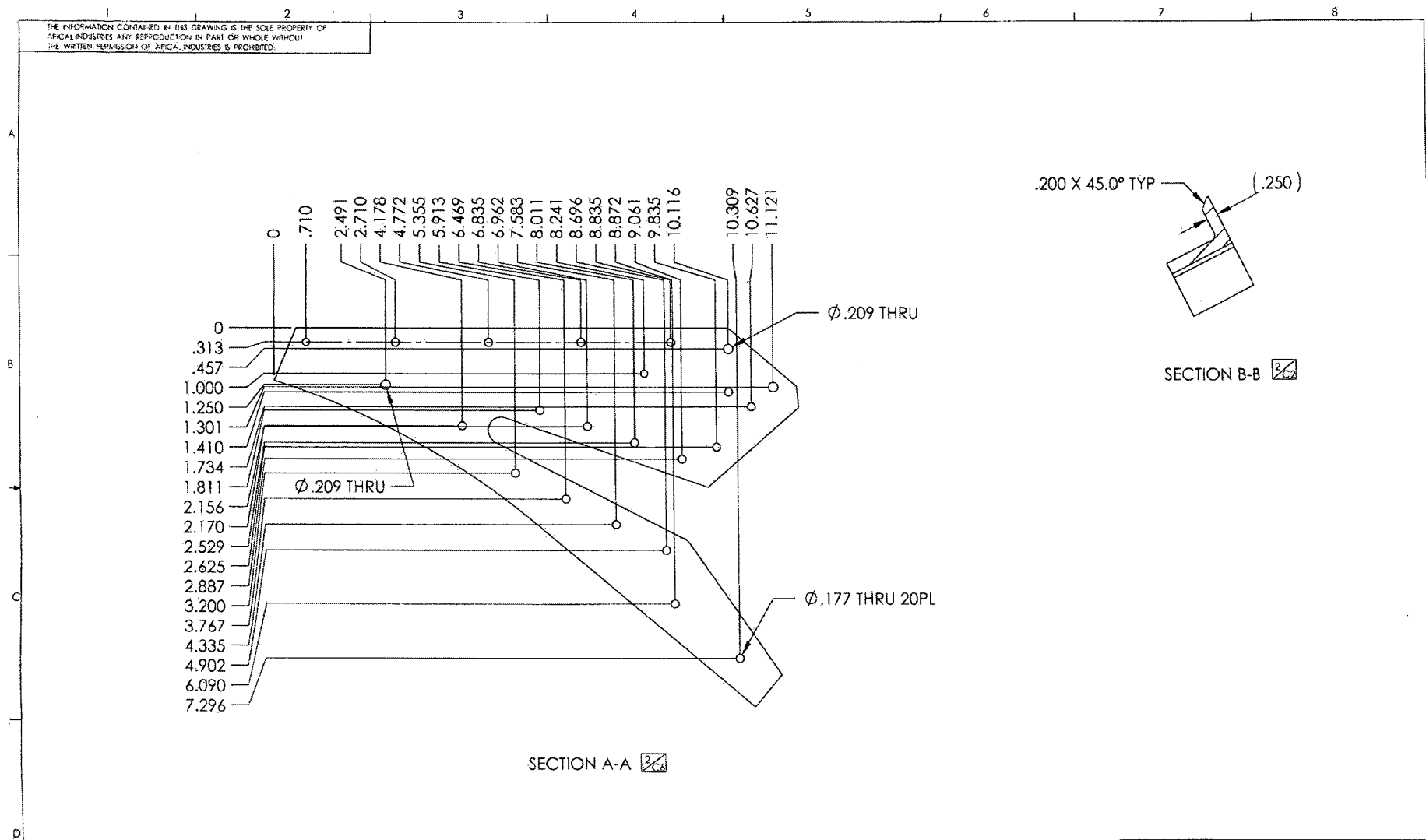
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ORIGINAL DATE 06-20-08		APICAL INDUSTRIES	
DRAWN BY C. HOFF		2608 TEMPLE HEIGHTS DR.	
CHECKED BY P. BRAY		OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DRAWING APPROVAL P. BRAY		UPPER CUTTER ASSY	
CONTRACT NO.			
IF PRESS OTHERWIS SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ± .01 DIMENSIONS IN PARENT ANGLES ± .5°		SHEET CODE 3 07/01/06	DWG. NO. 646.3300
		SCALE: NONE	REV N/C
		SHEET 2 OF 8	



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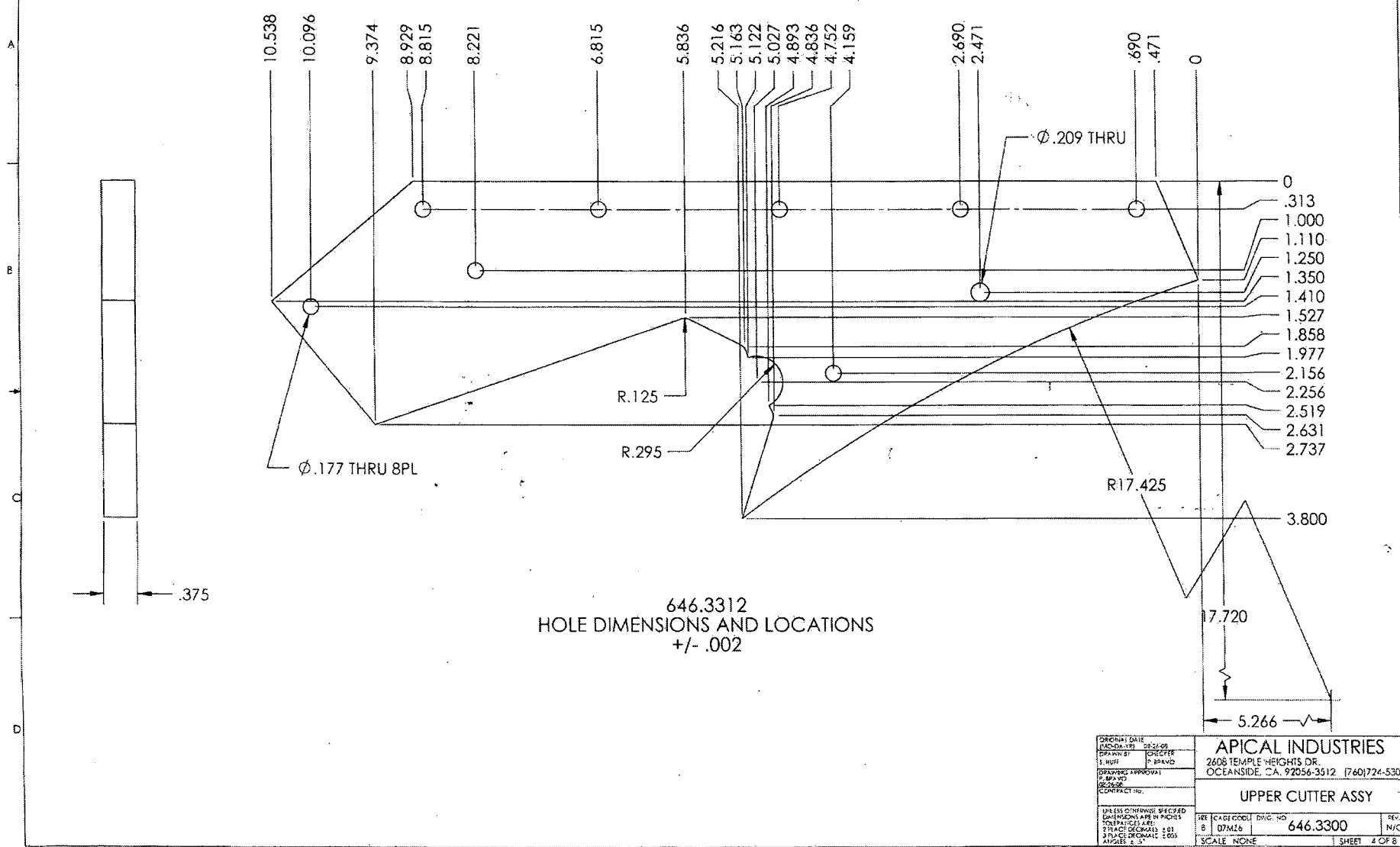
SECTION A-A 2/26

SECTION B-B 2/26

ORIGINAL DATE REV. DATE		APICAL INDUSTRIES	
REV. DATE		2608 TEMPLE HEIGHTS DR.	
REV. DATE		OCEANSIDE, CA. 92056-3512 (760)724-5300	
REV. DATE		UPPER CUTTER ASSY	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE FRACTIONS DECIMALS ±.01 3 PLACES DECIMALS ±.005 ANGLES ±.5°		REV. DATE	REV. DATE
SCALE NONE		646.3300	N/C
SHEET 3 OF 8			

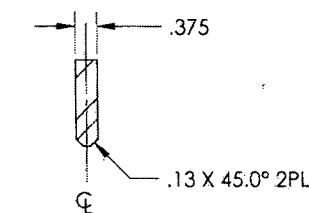
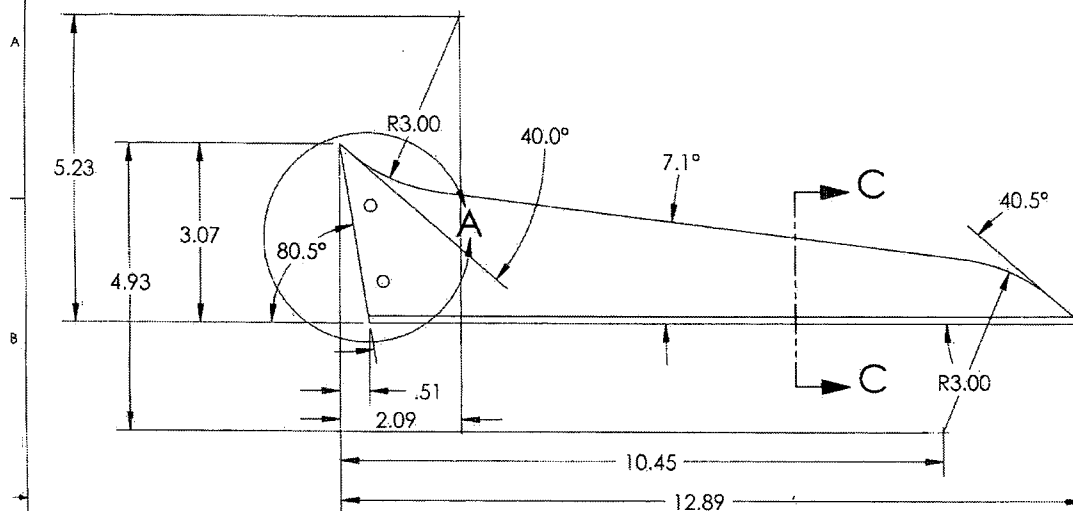
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REVIEWS			
REV.	DESCRIPTION	DATE	APPROVED

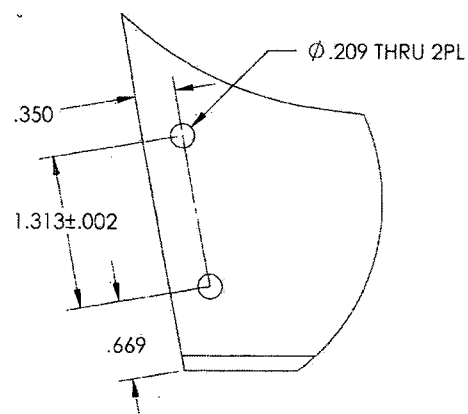


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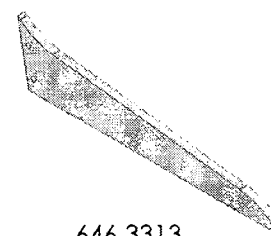
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED



SECTION C-C



DETAIL A

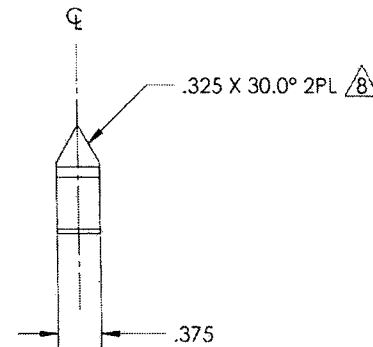
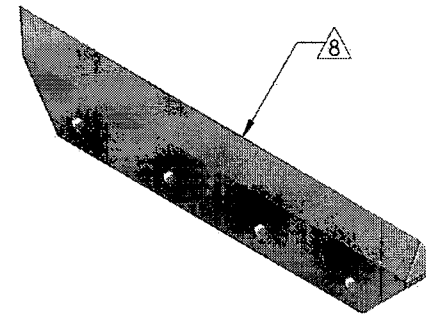
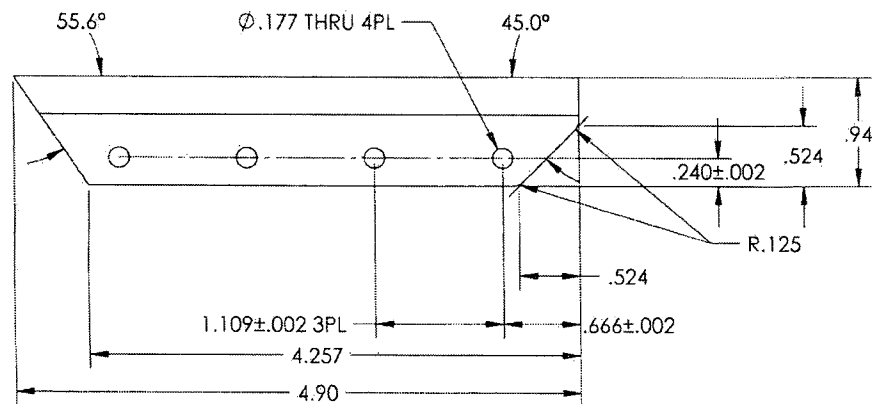


646.3313

ORIGINAL DATE REV. 1 08/20/06		APICAL INDUSTRIES	
DRAWN BY: C. CRECHET CHECKED BY: P. BRAYNO		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWING APPROVAL: P. BRAYNO C. CRECHET		UPPER CUTTER ASSY	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ± .01 2 PLACE DECIMALS ± .005 ANGLES ± .5°		REV. 1 DATE 07/12/06 SCALE NONE	DWG. NO. 646.3300 REV. 1/1/C SHEET 5 OF 8

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REVISION			
REV	DESCRIPTION	DATE	APPROVED



646.3314

ORIGINAL DATE (MM-DD-YY) 06-24-00		APAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92066-3512 (760)724-5300	
DRAWN BY S. HUFF			
CHECKED BY P. BABA-VO			
DRAWING APPROVAL (P. HUFF)			
DATE 06-24-00			
CONTRACT #110			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°			
REV	CAGE CODE	DWG. NO.	REV
B	07M26	646.3300	N/C
SCALE NONE		SHEET 6 OF 8	

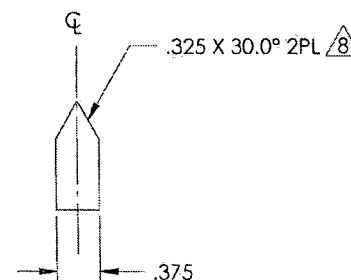
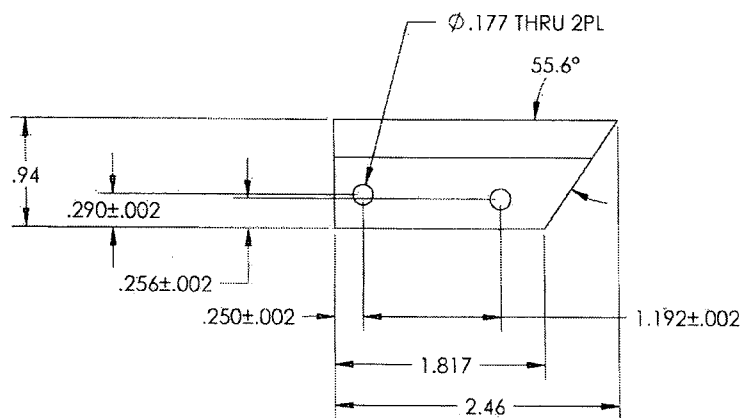
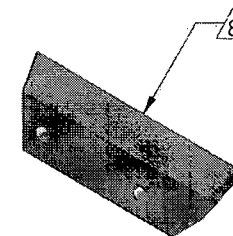
APICAL INDUSTRIES

2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056-3512 (760)724-5300

UPPER CUTTER ASSY

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REV	DESCRIPTION	DATE	APPROVED

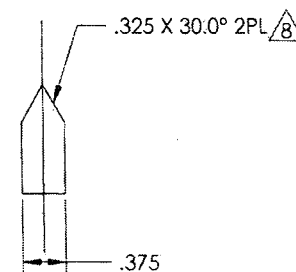
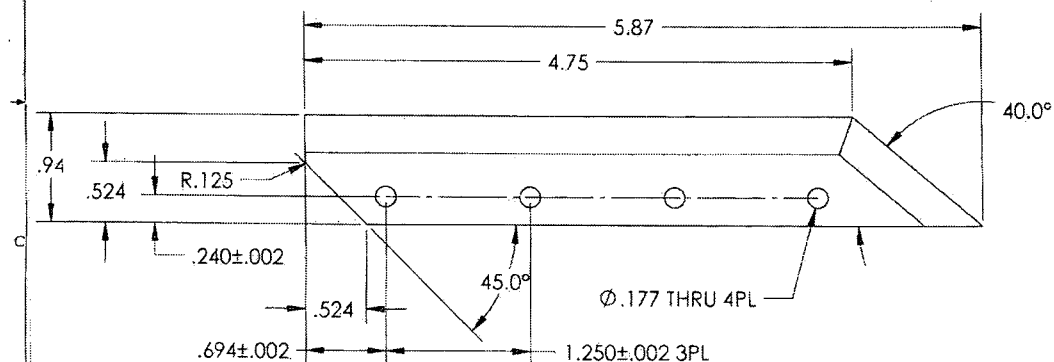


646.3315

ORIGINAL DATE 10-15-08		APICAL INDUSTRIES	
DRAWN BY S. HILL	CHECKED P. BRANCO	2609 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DRAWING APPROVAL P. BRANCO		UPPER CUTTER ASSY	
CONTRACT NO.			
UNITS: DIMENSIONS SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACES DECIMALS ± .01 2 PLACES DECIMALS ± .005 ANGLES ± .1°		REV: 3 CAGE CODE: 07M16 SCALE: NONE	REV: N/C DWG. NO: 646.3300 SHEET: 7 OF 6

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



646.3316

ORIGINAL DATE ENCLOSURE DRAWN BY S. HUIF P. BEAVO DRAWING APPROVAL DATE CONTRACT NO.		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.001 ANGLES ±.5°		UPPER CUTTER ASSY	
REV.	CAGE CODE	QWG NO.	REV.
8	67M26	646.3300	N/C
SCALE: NONE		SHEET 6 OF 8	





A.T.G. Industries Inc.  
731, rue Industrielle Rd.  
PLATING DEPARTMENT  
Rockland, On K4K 1T2  
Canada  
Ph: (613) 446-4544  
Fax: (613) 446-4556

### Pack List

Number: 63165

Date: 23-Jul-14

To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ship To


DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST  12 PCS 646.3711 (6.10) 10 PCS 646.3011 (10.25) 20 PCS 647.9710 (14.50) 6 PCS 646.3310 (18.10) 10 PCS 646.3810 (6.55) <u>10 PCS 646.3812 (6.10)</u> <u>6 PCS 646.3312 (12.05)</u>  HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2  PRIME MIL-P-23377J TYPE I CLASS N  4 PCS D4703-043 (0.90) BLACK ANODIZE MIL-A-8625 TYPE II CLASS 2  PRICE IS PER PIECE Job: 20140429	Rev:	Line:
PO: 24896			
Certificate of Conformance  A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.  ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY  DATE : <u>23/7/14</u>  CERTIFIED SIGNATURE : <u></u>  RECEIVER SIGNATURE : _____			